

SEP 25 2006

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# Fax

<b>To:</b>	Examiner Vy BUI U.S. Patent and Trademark Office	<b>From:</b>	Joseph W. Schmidt
<b>Fax:</b>	571-273-8300	<b>Date:</b>	September 25, 2006
<b>Phone:</b>		<b>Pages:</b>	7 (incl. Cover)
<b>Re:</b>	10/621,759	<b>CC:</b>	

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**\*Comments:**

Please see attached Amendment.

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SEP 25 2006 **PATENT**  
Atty. Docket No.: 2852 PRO (203-3408)**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): Scott Cunningham

Examiner: BUI, VY Q

Serial No.: 10/621,759

Group Art Unit 3763

Filed: July 17, 2003

Dated: September 25, 2006

For: SURGICAL NEEDLE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**AMENDMENT TRANSMITTAL FORM**

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. RATE FEE	ADDIT. RATE FEE
TOTAL	8 MINUS 20	=	X 9	\$	X 18 \$ 0
INDEP.	3 MINUS 3	=	X 43	\$	X 86 \$ 0
11 FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			X 140	\$	X 280 \$ 0
			TOTAL		OR TOTAL \$ 0
			ADDIT. FEE	\$ -0-	

\* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

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The Highest No. Previously Paid For (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

**CERTIFICATION OF FACSIMILE TRANSMISSION**

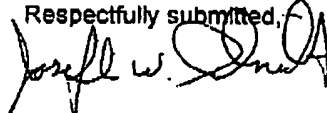
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Dated: September 25, 2006

Joseph W. Schmidt

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- ☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 21-0550. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 21-0550 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



Joseph W. Schmidt  
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JWS/td

SEP 25 2006

**PATENT**

**Attorney Docket: 2852 (203-3408)**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**APPLICANT:** Scott Cunningham **EXAMINER:** BUI, VY Q  
**APPL. NO.:** 10/621,759 **GROUP ART UNIT:** 3763  
**FILED:** July 17, 2003 **DATED:** September 25, 2006  
**FOR:** SURGICAL NEEDLE

Mail Stop: Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

**AMENDMENT**

Sir:

In furtherance to the Appeal Brief filed by Applicant on April 24, 2006, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 4 of this paper.

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Joseph W. Schmidt